

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

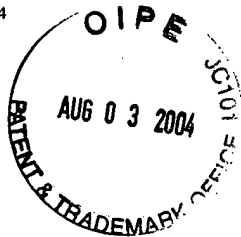
Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

22840 7590 05/13/2004

AMERSHAM BIOSCIENCES
 PATENT DEPARTMENT
 800 CENTENNIAL AVENUE
 PISCATAWAY, NJ 08855



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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Melissa Leck	(Depositor's name)
<i>[Signature]</i>	(Signature)
July 30, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/439,889	11/12/1999	SONG SHI	99.841	2251

TITLE OF INVENTION: METHOD OF PREPARING AN OLIGONUCLEOTIDE ARRAY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	08/13/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
NAFF, DAVID M	1651	435-174000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Royal N. Rominger, Jr.
 2. Stephen G. Ryan
 3. Yonggang Ji

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Amersham Biosciences AB

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Uppsala, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502-590 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

[Signature] July 30, 2004

08/05/2004 AWONDAF2 00000011 502590 09439889

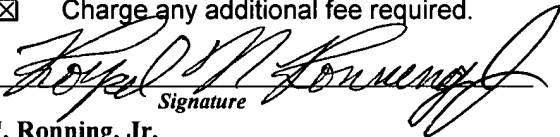

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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01 FC:1501 1330.00 DA
 02 FC:8001 15.00 DA

TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)					Docket No. PU9990	
Applicant(s): Song Shi						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
09/439,889	November 12, 1999	David M. Naff	22840	1651	2251	
Invention: Method of Preparing an Oligonucleotide Array						
Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450						
Transmitted herewith are the following for the above-identified application.						
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85						
<input checked="" type="checkbox"/> Utility Fee: <u>\$ 1330.00</u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____ 						
<input type="checkbox"/> Publication Fee: _____						
<input type="checkbox"/> A check in the amount of _____ is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 502-590 as described below.						
<input checked="" type="checkbox"/> Charge the amount of \$1,330.00						
<input checked="" type="checkbox"/> Credit any overpayment.						
<input checked="" type="checkbox"/> Charge any additional fee required.						
 Signature			Dated: July 30, 2004			
Royal N. Ronning, Jr. Amersham Biosciences Corp 800 Centennial Avenue Piscataway, New Jersey 08855						
(732) 457-8423 Reg. No.: 32,529						
CC:						
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">Certificate of Transmission by Facsimile</p> <p style="text-align: center;">This certificate may only be used if paying by deposit account.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax) on _____</p> <p style="text-align: center;">Date</p> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <p style="text-align: center;">Signature</p> <hr style="border: 0; border-top: 1px solid black; margin: 10px 0;"/> <p style="text-align: center;">Typed or Printed Name of Person Signing Certificate</p> </div> </div> <div style="width: 45%;"> <p style="text-align: center;">Certificate of Mailing by First Class Mail</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>I certify that this document and fee is being deposited July 30, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <div style="text-align: center; margin-top: 20px;">  Signature of Person Mailing Correspondence </div> <p style="text-align: center; margin-top: 5px;">Melissa Leck</p> <hr style="border: 0; border-top: 1px solid black; margin-top: 10px;"/> <p style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</p> </div> </div> </div>						